

**Maine Quality Forum
Advisory Council**

**Friday, September 9, 2005
Summative Minutes of Meeting**

Members present: Becky Martins, Dr. Paul Tisher, Dr. Jeffrey Holmstrom, Dr. Janice Wnek, Dr. Bob McArtor, Rebecca Colwell, Dr. Robert Keller, David White, Jonathan Beal, and Lisa Miller. Maureen Booth, Muskie School of Public Service and Dr. Dennis Shubert were also present.

Chair Dr. McArtor called the meeting to order at 9:10 AM.

Minutes

The Council approved August's meeting minutes.

Old Business:

Dirigo Health Reform Update

Karynlee Harrington offered updates on DirigoChoice membership and the Savings-Offset Payment process. Ms. Harrington reported that as of September 1 there are 8100 members and 683 small businesses enrolled in DirigoChoice. The Dirigo Health Agency Board of Directors decided to honor the 2005 enrollment cap, which ends in 2006. Effective January 1, 2006, the discount will change. Ms. Harrington said she will recommend a lower deductible option for those enrollees ineligible for a discount, to be effective January 1, 2006.

Ms. Harrington reported that the workgroup has held a series of meetings, and it reached consensus on what a paid claim is. The workgroup did not reach consensus on how to measure savings, so it presented two recommendations to the Board of Directors, which must submit its recommendation to the Superintendent of Insurance by September 17. A hearing on this decision will be held on October 27 at 9:00 AM in Gardiner; the Superintendent must make its decision no later than October 29. The workgroup will reconvene in late September to address additional changes.

Update on HAI & PIC Report

Dr. Shubert offered a progress report on healthcare associated infections (HAI), which are a leading cause of death but can be reduced.

The HAI workgroup discussed the public reporting of ventilator associated pneumonia, central line bloodstream infections, and urinary catheter infections. Serious challenges exist regarding the public reporting of ventilator associated pneumonia. The workgroup agreed that central line bloodstream infections should be reported publicly; these infections can be measured, and they can be reduced with the implementation of specific practices.

Maine Quality Forum will have HAI recommendations to the Maine Health Data Organization (MHDO) by September 9. The Council approved the HAI workgroup's guidance and its August 16 meeting minutes.

Dr. Shubert explained that the National Quality Forum has 42 ambulatory care indicators, six of which are up for a re-vote. He noted that the Performance Indicator Committee of the Council recommends supporting the indicators.

Serious Event Reporting Update

Dr. Shubert noted there have been significant changes since the Maine statute on serious event reporting was adopted. For example:

- The National Quality Forum has a list of serious events and has endorsed taxonomy from the Joint Commission on Accreditation of Healthcare Organizations, which enables data to be aggregated.
- The federal government passed the Patient Safety Act, which also enables serious event report data to be aggregated.

The Council also discussed the membership of its group on serious event reporting, which it agreed to call the Serious Reportable Event Committee. The Council agreed that this Committee will be a subgroup of the Advisory Council. The Council further agreed that the Serious Reportable Event Committee would be ad-hoc, with Jonathan Beal as its Chair. Other members include: Becky Martins, Lisa Miller, and David White. Lisa Miller agreed to contact Representative Trahan about this. The Council agreed that the Provider Group should be surveyed for possible members who are hospital-based. Additionally, Sandy Parker of the Maine Hospital Association, and Pat Philbrook of the Maine State Nurses Association agreed to join the Committee.

Maureen Booth said she will set up a pre-meeting conference call for later this month, and that Muskie will put together a briefing about serious event reporting. The Council agreed that the Serious Event Reporting Committee should hold three meetings including one for public testimony and one to review the Muskie briefing. The Governor's office would like the report by early December.

Safety Star Update

First, Dr. Shubert provided an update on the Safety Star program promotion. He informed the Council that Governor Baldacci will hold a press conference to launch the Safety Star program on Wednesday, September 14 at 10:00 AM. Dr. Shubert also noted that brochures with safety tips will be distributed to providers and that Safety Star newspaper advertisements will run.

Dr. Shubert then discussed the Safety Star program threshold regarding pharmacist involvement in prescribing medications. He recommended, and the Council endorsed, including two thresholds for this particular safe practice since Critical Access Hospitals (CAHs) carry less of a risk of medication error than other hospitals. The CAH threshold

will require all medication orders to be run through a pharmacy software system by trained nurses to cross-check for possible drug interactions, allergies, and physiologic abnormalities such as abnormal renal and liver function. The threshold for all other hospitals will require direct pharmacist involvement. Therefore for this process indicator there will be two thresholds, made appropriate by matching the safety investment to the perceived risk.

The Safety Star Validation Group will determine the necessary capacities of remote access (or telepresence) to meet program requirements. Dr. Tisher voiced concern that the current pharmacist shortage may make it impossible for hub hospitals to maintain 24/7 pharmacist coverage.

In response to a suggestion made by Nancy Morris of the Maine Health Alliance, Dr. Shubert agreed that Maine Quality Forum will emphasize the fact that although the Safety Star program is being launched this month, award recipients will not be announced until early next year.

MHINT Update

Dr. Shubert provided a MHINT update. He explained that MHINT fund-raising continues and that the Bureau of Health has offered an additional \$100,000 which will almost fully fund Phase II of the project (early implementation). Dr.

Shubert noted that the governance group convened to determine how the project should be governed. He also said the technology group is reviewing the RFI proposals, and that the consumer group will make sure privacy concerns are addressed upfront.

New Business:

Report of Contract Award RFP # 1

Dr. Shubert explained that the purpose of the RFP was to select a technology partner for analysis of the paid claims database. He reported that the Maine Quality Forum received three proposals: one from the Muskie School of Public Service, one from Health Dialog, and one from Mathematica. Maine Quality Forum selected the Health Dialog proposal and is confident that Health Dialog will allow Maine Quality Forum to advance future use of the paid claims database.

Discussion of Maine Quality Forum Advisory Council letter to GOHPF/SHP

Dr. McArtor asked for feedback from the Council on a draft letter about chronic illness care and the State Health Plan to the Governor's Office of Health Policy and Finance. David White suggested that the letter note the need for the funding of technology to assess chronic illness care if it is not currently available. Jonathan Beal suggested specific examples of organizations providing an advocacy and leadership role on care of chronic conditions be included in the letter. Rebecca Colwell commented that electronic medical records should be adequately addressed. The Council agreed that clarification of the term "population-based" in the letter is needed. Dr. Shubert agreed to redraft the letter, submit it to Dr. McArtor, and send it once Dr. McArtor approves it.

End of Life/Palliative Care

Rebecca Colwell gave an overview of palliative care, which strives to improve the quality of life for patients with advanced illness (and their families) and relieve their pain and suffering. Rebecca reported that raising awareness about palliative care is important since it is a type of care rarely discussed. Rebecca asked that the Maine Quality Forum:

- Ensure palliative care is included in measures of quality and best practices
- Promote consumer education about options for end of life care
- Support the development of palliative care research and approaches
- Include patient directives in electronic medical records.

Dr. Shubert noted that palliative care is addressed in part by the Safety Star Program, which requires hospitals to document patient wishes in charts.

Quality Measurement & Behavioral Health

Due to time constraints, Dr. Tisher agreed to postpone his presentation on quality measurement and behavioral health until the next meeting.

Grant Seeking

Dr. Shubert asked members for suggestions of foundations that share the goals of the Maine Quality Forum. Lisa Miller volunteered to help with grant seeking and noted that she would need information about the specific projects Maine Quality Forum wants to fund. It was agreed that this topic will be pursued in more detail in a future meeting.

Common Procedures for Consumer Guides to Paid Amounts

Dr. Shubert reported that Maine Quality Forum put together a list of common procedures to assist MHDO in providing consumer price information for services needed for meaningful care. The Council agreed that a common chiropractic procedure and physical therapy assessment should be added to the list of outpatient services.

Succession Planning

Dr. McArtor noted that Rebecca Coldwell will soon become the new Chair of the Advisory Council, as agreed to in a previous meeting. This change will vacate the Vice Chair position. Dr. McArtor asked Advisory Council members to contact him before the October 14 meeting if they are interested in becoming the new Vice Chair. The election will take place at the next Advisory Council meeting. The new Chair and Vice Chair will become effective the day after the October meeting.

Public Comments

There were no public comments.

Dr. McArtor adjourned the meeting at 12:10 PM.